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CONFIRMATION NO. 5044

<b>SERIAL NUMBER</b> 10/029,638	<b>FILING OR 371(c) DATE</b> 12/19/2001	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2152	<b>ATTORNEY DOCKET NO.</b> E003-1101US0
<b>RULE</b>				

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/266,134 02/01/2001 and claims benefit of 60/326,789 10/02/2001 *Ldt*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*N/A Ldt.*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

\*\* SMALL ENTITY \*\*

01/23/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 9	TOTAL CLAIMS 56	INDEPENDENT CLAIMS 12
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>Ldt</i>				

## ADDRESS

48789

## TITLE

Highly available transaction failure detection and recovery for electronic commerce transactions

<b>FILING FEE RECEIVED</b> 1137	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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